



The Kentucky Palliative Care Interdisciplinary Advisory Council unanimously recommends the following actions to improve serious illness care in the state:

Who Should Act:

Department for Medicaid Services

1. Request Kentucky Medicaid health plans submit an assessment of current internal and external strategies to support seriously ill members by December 30, 2021. This report may include how seriously ill populations are defined, specific interventions for these populations, data infrastructure for monitoring effectiveness of any interventions, identification of quality measures relevant to these populations, a review of pediatric concurrent care utilization, and areas for improving care for these populations.
2. Explore and review palliative care benefits in Medicaid managed care programs in other states. This review can include an assessment on the feasibility, costs and benefits associated with creating a similar benefit embedded in Kentucky Medicaid health plans by December 30, 2021.
3. Consider opportunities to include serious illness strategies and access to palliative care services for inclusion in any 2023 or subsequent year performance improvement requirements for Kentucky Medicaid health plans.
4. Evaluate the benefits and implications of revising state licensure requirements for hospitals and nursing facilities with 50 or more beds to provide access to specialist-level palliative care or mandate education for all clinicians on pain and symptom management, and communication skills for the seriously ill person.
5. Evaluate the benefits and implications of revising state health professional licensure and continuing education requirements, specifically in the areas of medicine, nursing, psychology, social work and behavioral health, to include a minimum number of hours of instruction on palliative care.
6. Create an online portal on the CHFS website for health care organizations in Kentucky to self-identify as offering palliative care services to inform the creation of a geomap that will highlight access points to palliative care within the state.

7. Convene the Kentucky Palliative Care Interdisciplinary Advisory Council, interested individuals from the Cabinet for Health and Family Services, the Department for Medicaid Services, Department of Insurance, Kentucky Medicaid health plans and provider associations for education on opportunities to improve access to palliative care in Kentucky.

Kentucky General Assembly

1. Request that the Interim Joint Committee on Health, Welfare, and Family Services conduct bi-annual hearings on the state of serious illness care in Kentucky. These hearings can include a review of the annual report produced by the Kentucky Palliative Care Interdisciplinary Advisory Council, an overview of palliative care and its benefits, workforce development for supporting serious illness, and payment policy for expanding access to palliative care services.

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ⁱ Definitions:

1. Palliative Care - The Center to Advance Palliative Care defines palliative care as “specialized medical care for people living with a serious illness. This type of care is focused on providing relief from the symptoms and stress of a serious illness. The goal is to improve quality of life for both the patient and the family. Palliative care is provided by a specially trained team of palliative care physicians, nurses, and other specialists who work together with a patient’s other doctors to provide an extra layer of support. It is appropriate at any age and at any stage in a serious illness, and it can be provided along with curative treatment.
2. Serious Illness - Serious illness can be described as “a health condition that carries a high risk of mortality and either negatively impacts a person’s daily functioning or quality of life or excessively strains his or her caregivers.”
3. Concurrent Care - The Patient Protection and Affordable Care Act of 2010 requires that terminally ill children, enrolled in Medicaid or states Children’s Health Insurance Plan hospice benefit have insurance coverage for hospice care and curative care related to their terminal conditions.